

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

Case number (if known) \_\_\_\_\_

Chapter you are filing under:

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

**Rose**

First name

**Marie**

Middle name

Bring your picture identification to your meeting with the trustee.

**Cerda**

Last name and Suffix (Sr., Jr., II, III)

**Alonzo**

First name

Middle name

**Cerda**

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

**xxx-xx-9779**

**xxx-xx-5478**

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

☒ I have not used any business name or EINs.

☒ I have not used any business name or EINs.

Include trade names and  
doing business as names

Business name(s)

Business name(s)

EINs

EINs

**5. Where you live**

**2522 Wesley Ave  
Berwyn, IL 60402-2513**

Number, Street, City, State & ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State & ZIP Code

**Cook**

County

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

Number, P.O. Box, Street, City, State & ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known) \_\_\_\_\_

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☒ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13

8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.  
☐ Yes.
- |                |            |                   |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No.  
☐ Yes.
- |                           |                             |
|---------------------------|-----------------------------|
| Debtor _____              | Relationship to you _____   |
| District _____ When _____ | Case number, if known _____ |
| Debtor _____              | Relationship to you _____   |
| District _____ When _____ | Case number, if known _____ |

11. **Do you rent your residence?** ☒ No. Go to line 12.  
☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

\_\_\_\_\_  
Name of business, if any

\_\_\_\_\_  
Number, Street, City, State & ZIP Code

*Check the appropriate box to describe your business:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).*

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

☒ No.

☐ Yes. What is the hazard? \_\_\_\_\_

If immediate attention is needed, why is it needed? \_\_\_\_\_

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

Where is the property? \_\_\_\_\_

\_\_\_\_\_  
Number, Street, City, State & Zip Code

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**
- Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.
- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**
- To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
- Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
- Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
- ☐ **I am not required to receive a briefing about credit counseling because of:**
- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.
- If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**
- Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.
- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**
- To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
- Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
- If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
- Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
- ☐ **I am not required to receive a briefing about credit counseling because of:**
- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.
- If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

<b>16. What kind of debts do you have?</b>	<b>16a.</b>	<b>Are your debts primarily consumer debts?</b> <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.
	<b>16b.</b>	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.
	<b>16c.</b>	State the type of debts you owe that are not consumer debts or business debts <hr/>

  

<b>17. Are you filing under Chapter 7?</b>  <b>Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?</b>	<input type="checkbox"/> No.  <input checked="" type="checkbox"/> Yes.	I am not filing under Chapter 7. Go to line 18.  I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
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<b>18. How many Creditors do you estimate that you owe?</b>	<input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
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<b>19. How much do you estimate your assets to be worth?</b>	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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<b>20. How much do you estimate your liabilities to be?</b>	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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**Part 7: Sign Below**

<b>For you</b>	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: bottom;"> <u>/s/ Rose Marie Cerda</u>  <b>Rose Marie Cerda</b>            Signature of Debtor 1         </td> <td style="width: 50%; vertical-align: bottom;"> <u>/s/ Alonzo Cerda</u>  <b>Alonzo Cerda</b>            Signature of Debtor 2         </td> </tr> <tr> <td style="vertical-align: bottom;">           Executed on <u>July 22, 2018</u>            MM / DD / YYYY         </td> <td style="vertical-align: bottom;">           Executed on <u>July 22, 2018</u>            MM / DD / YYYY         </td> </tr> </table>	<u>/s/ Rose Marie Cerda</u> <b>Rose Marie Cerda</b> Signature of Debtor 1	<u>/s/ Alonzo Cerda</u> <b>Alonzo Cerda</b> Signature of Debtor 2	Executed on <u>July 22, 2018</u> MM / DD / YYYY	Executed on <u>July 22, 2018</u> MM / DD / YYYY
<u>/s/ Rose Marie Cerda</u> <b>Rose Marie Cerda</b> Signature of Debtor 1	<u>/s/ Alonzo Cerda</u> <b>Alonzo Cerda</b> Signature of Debtor 2				
Executed on <u>July 22, 2018</u> MM / DD / YYYY	Executed on <u>July 22, 2018</u> MM / DD / YYYY				

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**/s/ James J. Haller**

Signature of Attorney for Debtor

Date

**July 22, 2018**

MM / DD / YYYY

**James J. Haller**

Printed name

**James J. Haller Attorney at Law**

Firm name

**PO Box 626**

**Mundelein, IL 60060-0626**

Number, Street, City, State & ZIP Code

Contact phone **(847) 325-5008**

Email address

**jhall@hallerlawgroup.com**

**6226796 Illinois**

Bar number & State

Fill in this information to identify your case:			
Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Alonzo Cerda</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

		Your assets Value of what you own
1. <b>Schedule A/B: Property</b> (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	<b>242,000.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	<b>230,486.60</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	<b>472,486.60</b>

#### Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)		
2a. Copy the total you listed in Column A Amount of claim, at the bottom of the last page of Part 1 of Schedule D...	\$	<b>249,913.47</b>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$	<b>8,070.32</b>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	\$	<b>329,473.00</b>
<b>Your total liabilities</b>		<b>\$ 587,456.79</b>

#### Part 3: Summarize Your Income and Expenses

4. <b>Schedule I: Your Income</b> (Official Form 106I)		
Copy your combined monthly income from line 12 of Schedule I.....	\$	<b>6,868.65</b>
5. <b>Schedule J: Your Expenses</b> (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J.....	\$	<b>7,092.19</b>

#### Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.



Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **9,447.30**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

	Total claim
<b>From Part 4 on Schedule E/F, copy the following:</b>	
9a. Domestic support obligations (Copy line 6a.)	\$ <b>0.00</b>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <b>8,070.32</b>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <b>0.00</b>
9d. Student loans. (Copy line 6f.)	\$ <b>171,287.65</b>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <b>0.00</b>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <b>0.00</b>
9g. <b>Total.</b> Add lines 9a through 9f.	\$ <b>179,357.97</b>

**Fill in this information to identify your case and this filing:**

Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Alonzo Cerda</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION</b>			
Case number _____			

☐ Check if this is an amended filing

## Official Form 106A/B Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

**2522 Wesley Ave**

Street address, if available, or other description

**Berwyn** **IL** **60402-2513**

City State ZIP Code

County

What is the property? Check all that apply

- ☐ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other \_\_\_\_\_

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<b>\$242,000.00</b>	<b>\$242,000.00</b>

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

**PIN: 16-30-225-022-0000**

**Value from Certified Market Analysis performed by Denise Pav of Pav Realtors in September 2017.**

**Suggested listing range given is \$239,900.00 to \$244,000.00. Deferred maintenance noted including water/seepage from foundation and leaking from plumbing on the first floor. Also there is a toilet and sink installed in the basement which will need to be removed before house could be sold.**

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$242,000.00**

### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No  
☒ Yes

3.1 Make: **Chevrolet**  
Model: **Cavalier**  
Year: **1998**  
Approximate mileage: **100000**  
Other information:

**Value based on Debtors' estimate**

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

**\$300.00**

**\$300.00**

3.2 Make: **Nissan**  
Model: **Sentra**  
Year: **2015**  
Approximate mileage:  
Other information:

**VIN#: 3N1AB7AP9fi57441**

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

**\$12,613.98**

**\$12,613.98**

3.3 Make: **Nissan**  
Model: **Rogue Select AWD**  
Year: **2015**  
Approximate mileage: **25000**  
Other information:

**VIN#: JN8AS5MV8FW767137**

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

**\$16,556.25**

**\$16,556.25**

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No  
☐ Yes

**5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>**

**\$29,470.23**

**Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No  
☒ Yes. Describe.....

**Sofas, loveseats, entertainment center, coffee table, end tables, kitchen table and chairs, dining room table and chairs, china, two beds, dressers, lamps, refrigerator, freezer, stove, microwave, dish washer, washer and dryer, dishes and flatware, pots and pans, lawnmower, yard tools.**

**\$1,460.00**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

**TVs: 55", 40" old box, 32" old box, 28"; 3 dvd players, PC, laptop, printer, digital camara, camcorder, music collection, stereo, telephone, cell phones**

**\$430.00**

**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe.....

**White Sox signed bat**

**\$60.00**

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

**treadmill, elipitical, 2 bikes**

**\$150.00**

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

**Clothing for three adults**

**\$150.00**

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

**Wedding rings, rings, earrings, necklaces, bracelets**

**\$2,500.00**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

☐ No

☒ Yes. Describe.....

**Dog**

**\$100.00**

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

**\$4,850.00**

**Part 4: Describe Your Financial Assets**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes.....

**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes.....

Institution name:

17.1.	Checking Account	Bank of America 1908 Balance as of 7/22/18	\$82.14
17.2.	Savings Account	Bank of America 1944 Balance as of 7/22/18	\$100.92
17.3.	Checking Account	Chase Bank 2006 Balance as of 7/22/18	\$541.20
17.4.	Savings Account	Chase Bank 8019 Balance as of 7/22/18	\$146.18
17.5.	Checking Account	PNC Bank Acct # 7642 Balance as of 7/23/18	\$61.91
17.6.	Checking Account	PNC Bank 7677 "Growth" account Balance as of 7/22/18	\$50.00
17.7.	Savings Account	PNC Bank "Reserve" account 7669 Balance as of 7/22/18	\$118.21
17.8.	Checking Account	Bank of America 2112 Joint account with Rose Cerda and Anthony Cerda (son). (income from Anthony only). Balance as of 7/22/18.	\$0.00
17.9.	Checking Account	Newmark C.U. #75 Balance as of 7/22/18	\$32.90
17.10.	Other Financial Account	Newmark C.U. #01 "Prime Share" Balance as of 7/22/18	\$5.00
17.11.	Savings Account	Newmark C.U. #07 "Goal Saver" Balance as of 7/22/18	\$220.00

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes.....

Institution or issuer name:

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:	Institution name:	
<b>401(k) or Similar Plan</b>	<b>Mass Mutual IRA/401k through employment 0001</b>	<b>\$37,617.18</b>
<b>IRA</b>	<b>Conseco/Washington National 9117 Rose Cerda's IRA</b>	<b>\$2,405.78</b>
<b>IRA</b>	<b>Chase Bank 4504</b>	<b>\$4,130.40</b>
<b>401(k) or Similar Plan</b>	<b>JP Morgan 401k # 0629</b>	<b>\$48,564.24</b>
<b>IRA</b>	<b>Chase Bank IRA #8958</b>	<b>\$4,144.06</b>
<b>IRA</b>	<b>Conseco/Washington Mutual/Washington National Insurance Company Alonzo Cerda's IRA</b>	<b>\$24,607.98</b>

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes. ....

Institution name or individual:

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

☒ No

☐ Yes.....

Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No  
☐ Yes. Give specific information.....

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information..

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☐ No  
☒ Yes. Name the insurance company of each policy and list its value.

Company name:	Beneficiary:	Surrender or refund value:
<b>One American Life Insurance 4738 Term Policy</b>	<b>Spouse</b>	<b>\$0.00</b>
<b>Colonial Life Insurance 2027 Term Insurance</b>	<b>Spouse</b>	<b>\$0.00</b>
<b>State Farm Insurance 2413 Whole Life Insurance Policy</b>		<b>\$13,608.79</b>
<b>Pan American Life 1440 Whole Life Policy</b>		<b>\$14,610.77</b>
<b>Local 734 Union Term Policy</b>	<b>Spouse</b>	<b>\$0.00</b>
<b>State Farm 2816 Whole Life Insurance Payment</b>	<b>Spouse</b>	<b>\$6,507.83</b>
<b>Pan American 1430 Whole Life</b>	<b>Spouse</b>	<b>\$2,032.07</b>
<b>Athene Annuity and Life Company Insured is son V.Cerda (adult)</b>		<b>\$3,711.48</b>
<b>Pan American Life #0260 Insured is son A.Cerda (adult)</b>		<b>\$8,598.61</b>

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No  
☐ Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

☐ Yes. Describe each claim.....

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☒ No

☐ Yes. Describe each claim.....

35. **Any financial assets you did not already list**

☒ No

☐ Yes. Give specific information..

36. **Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

**\$171,897.65**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. **Do you own or have any legal or equitable interest in any business-related property?**

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

☒ No. Go to Part 7.

☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

53. **Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

☐ No

☒ Yes. Give specific information.....

**Membership in Diamond Resorts U.S. Collection (the "Collection") which includes (i) membership in the Diamond Resorts U.S. Collection Members Association, a non-stock, non-profit Delaware corporation whose principal place of business is located in Clark County, Nevada and (ii) Points for use in the Collection.**

**\$24,238.72**

54. **Add the dollar value of all of your entries from Part 7. Write that number here .....**

**\$24,238.72**

**Part 8: List the Totals of Each Part of this Form**

55. <b>Part 1: Total real estate, line 2 .....</b>		<b>\$242,000.00</b>
56. <b>Part 2: Total vehicles, line 5</b>	<b>\$29,470.23</b>	
57. <b>Part 3: Total personal and household items, line 15</b>	<b>\$4,850.00</b>	
58. <b>Part 4: Total financial assets, line 36</b>	<b>\$171,897.65</b>	
59. <b>Part 5: Total business-related property, line 45</b>	<b>\$0.00</b>	
60. <b>Part 6: Total farm- and fishing-related property, line 52</b>	<b>\$0.00</b>	
61. <b>Part 7: Total other property not listed, line 54</b>	<b>+ \$24,238.72</b>	
62. <b>Total personal property. Add lines 56 through 61...</b>	<b>\$230,456.60</b>	<b>Copy personal property total \$230,456.60</b>
63. <b>Total of all property on Schedule A/B. Add line 55 + line 62</b>		<b>\$472,456.60</b>



## Fill in this information to identify your case:

Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Debtor 1 Exemptions</b>			
2522 Wesley Ave Berwyn IL, 60402-2513 Line from <i>Schedule A/B</i> 1.1	\$242,000.00	<input checked="" type="checkbox"/> \$30,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
Chevrolet Cavalier 1998 100000 Line from <i>Schedule A/B</i> 3.1	\$300.00	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Sofas, loveseats, entertainment center, coffee table, end tables, kitchen table and chairs, dining room table and chairs, china, two beds, dressers, lamps, refrigerator, freezer, stove, microwave, dish washer, washer and dryer, dishes and flatware, pots and pans Line from <i>Schedule A/B</i> 6.1	\$1,460.00	<input checked="" type="checkbox"/> \$1,460.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>TVs: 55", 40" old box, 32" old box, 28"; 3 dvd players, PC, laptop, printer, digital camara, camcorder, music collection, stereo, telephone, cell phones</b> Line from Schedule A/B: 7.1	<u>\$430.00</u>	<input checked="" type="checkbox"/> <u>\$430.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>treadmill, elipitical, 2 bikes</b> Line from Schedule A/B: 9.1	<u>\$150.00</u>	<input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Clothing for three adults</b> Line from Schedule A/B: 11.1	<u>\$150.00</u>	<input type="checkbox"/> <u>                    </u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
<b>Wedding rings, rings, earrings, necklaces, bracelets</b> Line from Schedule A/B: 12.1	<u>\$2,500.00</u>	<input checked="" type="checkbox"/> <u>\$2,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Dog</b> Line from Schedule A/B: 13.1	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Bank of America 1908 Balance as of 7/22/18</b> Line from Schedule A/B: 17.1	<u>\$82.14</u>	<input checked="" type="checkbox"/> <u>\$82.14</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Bank of America 1944 Balance as of 7/22/18</b> Line from Schedule A/B: 17.2	<u>\$100.92</u>	<input checked="" type="checkbox"/> <u>\$100.92</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Chase Bank 2006 Balance as of 7/22/18</b> Line from Schedule A/B: 17.3	<u>\$541.20</u>	<input checked="" type="checkbox"/> <u>\$541.20</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Chase Bank 8019 Balance as of 7/22/18</b> Line from Schedule A/B: 17.4	<u>\$146.18</u>	<input checked="" type="checkbox"/> <u>\$146.18</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>PNC Bank Acct # 7642 Balance as of 7/23/18</b> Line from Schedule A/B: 17.5	<u>\$61.91</u>	<input checked="" type="checkbox"/> <u>\$61.91</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>PNC Bank 7677 "Growth" account Balance as of 7/22/18</b> Line from Schedule A/B: 17.6	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>PNC Bank "Reserve" account 7669</b> <b>Balance as of 7/22/18</b> Line from Schedule A/B: 17.7	<u>\$118.21</u>	<input checked="" type="checkbox"/> <u>\$118.21</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Newmark C.U. #75 Balance as of 7/22/18</b> Line from Schedule A/B: 17.9	<u>\$32.90</u>	<input checked="" type="checkbox"/> <u>\$65.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Newmark C.U. #01 "Prime Share" Balance as of 7/22/18</b> Line from Schedule A/B: 17.10	<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Newmark C.U. #07 "Goal Saver" Balance as of 7/22/18</b> Line from Schedule A/B: 17.11	<u>\$220.00</u>	<input checked="" type="checkbox"/> <u>\$730.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
<b>Mass Mutual IRA/401k through employment 0001</b> Line from Schedule A/B: 21.1	<u>\$37,617.18</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
<b>Conseco/Washington National 9117 Rose Cerda's IRA</b> Line from Schedule A/B: 21.2	<u>\$2,405.78</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
<b>Chase Bank 4504</b> Line from Schedule A/B: 21.3	<u>\$4,130.40</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
<b>JP Morgan 401k # 0629</b> Line from Schedule A/B: 21.4	<u>\$48,564.24</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
<b>Chase Bank IRA #8958</b> Line from Schedule A/B: 21.5	<u>\$4,144.06</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
<b>Conseco/Washington Mutual/Washington National Insurance Company Alonzo Cerda's IRA</b> Line from Schedule A/B: 21.6	<u>\$24,607.98</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
<b>State Farm Insurance 2413 Whole Life Insurance Policy</b> Line from Schedule A/B: 31.3	<u>\$13,608.79</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	215 ILCS 5/238
<b>Pan American Life 1440 Whole Life Policy</b> Line from Schedule A/B: 31.4	<u>\$14,610.77</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	215 ILCS 5/238

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Local 734 Union Term Policy</b> Line from Schedule A/B: <b>31.5</b>	<b>\$0.00</b>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>215 ILCS 5/238</b>
<b>State Farm 2816 Whole Life Insurance Payment</b> Line from Schedule A/B: <b>31.6</b>	<b>\$6,507.83</b>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>215 ILCS 5/238</b>
<b>Pan American 1430 Whole Life</b> Line from Schedule A/B: <b>31.7</b>	<b>\$2,032.07</b>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>215 ILCS 5/238</b>

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

**Fill in this information to identify your case:**

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Alonzo Cerda</b>		
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

**Official Form 106C**

**Schedule C: The Property You Claim as Exempt**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
--	---	---	------------------------------------

**Debtor 2 Exemptions**

Brief description:  
Line from *Schedule A/B* \_\_\_\_\_ ☐ \_\_\_\_\_

☐ 100% of fair market value, up to any applicable statutory limit

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Fill in this information to identify your case:

Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Alonzo Cerda</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
<b>2.1 Bank America</b> Creditor's Name  <b>PO Box 5170</b> <b>Simi Valley, CA</b> <b>93062-5170</b> Number, Street, City, State & Zip Code	Describe the property that secures the claim: <b>Mortgage account Notice only</b>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	<b>\$0.00</b>	<b>\$0.00</b>
<b>2.2 Bank of America</b> Creditor's Name  <b>NC4-105-03-14</b> <b>PO Box 26012</b> <b>Greensboro, NC</b> <b>27420-6012</b> Number, Street, City, State & Zip Code	Describe the property that secures the claim: <b>2522 Wesley Ave, Berwyn, IL</b> <b>60402-2513</b> <b>PIN: 16-30-225-022-0000 Value from</b> <b>Certified Market Analysis</b> <b>performed by Denise Pav of Pav</b> <b>Realtors in September 2017.</b> <b>Suggested listing range given</b> <b>is \$239,900.00 to \$244,000.00.</b> <b>Deferred maintenance</b> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	<b>\$196,504.52</b>	<b>\$242,000.00</b>

Date debt was incurred **2007-08**

Last 4 digits of account number **7813**

Debtor 1 **Rose Marie Cerda** Case number (if know) \_\_\_\_\_  
First Name Middle Name Last Name  
Debtor 2 **Alonzo Cerda**  
First Name Middle Name Last Name

- ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit  
☐ Check if this claim relates to a community debt ☐ Other (including a right to offset) \_\_\_\_\_

Date debt was incurred **2012-08** Last 4 digits of account number **9848**

**2.3 Bank of America** Describe the property that secures the claim: **\$0.00** **\$0.00** **\$0.00**

Creditor's Name

**NC4-105-03-14  
PO Box 26012  
Greensboro, NC  
27420-6012**

Number, Street, City, State & Zip Code

**Mortgage account Notice only**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred **2009-03-30** Last 4 digits of account number **8021**

**2.4 Bank of America** Describe the property that secures the claim: **\$0.00** **\$0.00** **\$0.00**

Creditor's Name

**NC4-102-03-14  
PO Box 26012  
Greensboro, NC  
27420-6012**

Number, Street, City, State & Zip Code

**Mortgage account Notice only**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred **2007-10** Last 4 digits of account number **3999**

**2.5 Diamond Resorts US Collection Dev LLC** Describe the property that secures the claim: **\$24,238.72** **\$24,238.72** **\$0.00**

Creditor's Name

**10600 W Charleston Blvd  
Las Vegas, NV  
89135-1014**

Number, Street, City, State & Zip Code

**Membership in Diamond Resorts U.S. Collection (the "Collection") which includes (i) membership in the Diamond Resorts U.S. Collection Members Association, a non-stock, non-profit Delaware corporation whose principal place of business is loc**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Debtor 1 **Rose Marie Cerda** Case number (if know) \_\_\_\_\_  
 First Name Middle Name Last Name  
 Debtor 2 **Alonzo Cerda**  
 First Name Middle Name Last Name

**Who owes the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim relates to a community debt

**Nature of lien.** Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Date debt was incurred **02/28/2016** Last 4 digits of account number **0213**

2.6 **Santander Consumer USA**

Creditor's Name

**PO Box 1984  
 Carmel, IN 46082-1984**

Number, Street, City, State & Zip Code

**Describe the property that secures the claim:**

**2015 Nissan Sentra  
 VIN#: 3N1AB7AP9ffi57441**

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Nature of lien.** Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number **0013**

2.7 **Santander Consumer USA**

Creditor's Name

**PO Box 1984  
 Carmel, IN 46082-1984**

Number, Street, City, State & Zip Code

**Describe the property that secures the claim:**

**2015 Nissan Rogue Select AWD  
 VIN#: JN8AS5MV8FW767137**

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Nature of lien.** Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Date debt was incurred **02/03/2018** Last 4 digits of account number **1600**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$249,913.47**

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

**\$249,913.47**

**Part 2: List Others to Be Notified for a Debt That You Already Listed**



Debtor 1 **Rose Marie Cerda**

First Name Middle Name Last Name

Case number (if know) \_\_\_\_\_

Debtor 2 **Alonzo Cerda**

First Name Middle Name Last Name

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐

Name, Number, Street, City, State & Zip Code

**Bank of America**  
**Attn: Bankruptcy Department**  
**475 Crosspoint Pkwy**  
**Getzville, NY 14068-1609**

On which line in Part 1 did you enter the creditor? 2.2

Last 4 digits of account number 9848

☐

Name, Number, Street, City, State & Zip Code

**Bank of America**  
**PO Box 31785**  
**Tampa, FL 33631-3785**

On which line in Part 1 did you enter the creditor? 2.2

Last 4 digits of account number 9848

☐

Name, Number, Street, City, State & Zip Code

**Bankamerica**  
**4909 Savarese Cir**  
**Tampa, FL 33634-2413**

On which line in Part 1 did you enter the creditor? 2.2

Last 4 digits of account number 9848

☐

Name, Number, Street, City, State & Zip Code

**Bankamerica**  
**4909 Savarese Cir**  
**Tampa, FL 33634-2413**

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number 7813

☐

Name, Number, Street, City, State & Zip Code

**Bankamerica**  
**4909 Savarese Cir**  
**Tampa, FL 33634-2413**

On which line in Part 1 did you enter the creditor? 2.3

Last 4 digits of account number 8021

☐

Name, Number, Street, City, State & Zip Code

**Bk of Amer**  
**4909 Savarese Cir**  
**Tampa, FL 33634-2413**

On which line in Part 1 did you enter the creditor? 2.4

Last 4 digits of account number 3999

☐

Name, Number, Street, City, State & Zip Code

**Continental Autos, Inc.**  
**6701 S La Grange Rd**  
**Hodgkins, IL 60525-4840**

On which line in Part 1 did you enter the creditor? 2.7

Last 4 digits of account number 1600

**Fill in this information to identify your case:**

Debtor 1 Rose Marie Cerda  
First Name Middle Name Last Name

Debtor 2 Alonzo Cerda  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

Case number \_\_\_\_\_  
(if known)

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>Internal Revenue Service</b> Priority Creditor's Name	5478	\$8,070.32	\$8,070.32
	When was the debt incurred? <u>2015, 2016 and 2017</u>			\$0.00
	<b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b> <small>Number Street City State Zip Code</small>			
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.1

**Allen Rosenbaum MD**

Nonpriority Creditor's Name

**3340 Oak Park Ave Ste 304  
Berwyn, IL 60402-3483**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **7370**

**\$153.52**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.2

**Amex**

Nonpriority Creditor's Name

**Correspondence  
PO Box 981540  
El Paso, TX 79998-1540**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1443**

**\$0.00**

When was the debt incurred? **2003-10**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.3

**Amex**

Nonpriority Creditor's Name

**Correspondence  
PO Box 981540  
El Paso, TX 79998-1540**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3523**

**\$0.00**

When was the debt incurred? **2003-04**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.4

**Amex**

Nonpriority Creditor's Name

**Correspondence**

**PO Box 981540**

**El Paso, TX 79998-1540**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **2432**

**\$0.00**

When was the debt incurred? **2010-01**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.5

**Amex**

Nonpriority Creditor's Name

**Correspondence**

**PO Box 981540**

**El Paso, TX 79998-1540**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0483**

**\$0.00**

When was the debt incurred? **2003-04-12**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.6

**Amex**

Nonpriority Creditor's Name

**Correspondence**

**PO Box 981540**

**El Paso, TX 79998-1540**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1513**

**\$0.00**

When was the debt incurred? **2003-10-10**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.7

**Athletico Sports Medicine**

Nonpriority Creditor's Name

**625 Enterprise Dr  
Oak Brook, IL 60523-8813**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**\$364.00**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.8

**Bank of America**

Nonpriority Creditor's Name

**NC4-105-03-14**

**PO Box 26012**

**Greensboro, NC 27420-6012**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**2924**

**\$0.00**

**When was the debt incurred?**

**2000-05**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.9

**Bank of America**

Nonpriority Creditor's Name

**NC4-105-03-14**

**PO Box 26012**

**Greensboro, NC 27420-6012**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**2403**

**\$0.00**

**When was the debt incurred?**

**1993-07**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.10

**Barclays Bank Delaware**

Nonpriority Creditor's Name

**100 S West St  
Wilmington, DE 19801-5015**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **2915**

**\$7,279.97**

When was the debt incurred? **2015-09**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account (Diamond Resorts M.C.)**

4.11

**Barclays Bank Delaware**

Nonpriority Creditor's Name

**100 S West St  
Wilmington, DE 19801-5015**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **5298**

**\$3,660.61**

When was the debt incurred? **2016-02**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account (Diamond Resorts M.C.)**

4.12

**Blue Cross Blue Shield of Illinois**

Nonpriority Creditor's Name

**PO Box 7344  
Chicago, IL 60680-7344**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$110.99**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Overpayment of medical claim to Central DuPage Hospital**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.13	<b>Cap1/bstby</b> Nonpriority Creditor's Name <b>Capital</b> <b>1 1 Retail Srvs Attn Bankruptcy</b> <b>Salt Lake City, UT 84130</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>2454</b> When was the debt incurred? <b>1993-10</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account Best Buy</b>	<b>\$459.96</b>
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4.14	<b>Capital One</b> Nonpriority Creditor's Name <b>PO Box 30253</b> <b>Salt Lake City, UT 84130-0253</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>1916</b> When was the debt incurred? <b>2011-07</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account - Teamsters</b>	<b>\$6,535.00</b>
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4.15	<b>Capital One</b> Nonpriority Creditor's Name <b>PO Box 30253</b> <b>Salt Lake City, UT 84130-0253</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>1561</b> When was the debt incurred? <b>2011-07</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account Teamsters</b>	<b>\$4,811.19</b>
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Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.16	<b>Capital One</b> Nonpriority Creditor's Name <b>Attn: General</b> <b>Correspondence/Bankruptcy</b> <b>PO Box 30285</b> <b>Salt Lake City, UT 84130-0285</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>5569</b> When was the debt incurred? <b>2011-07</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$0.00</b>
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4.17	<b>Capital One / Carson</b> Nonpriority Creditor's Name <b>Attn: General</b> <b>Correspondence/Bankruptcy</b> <b>PO Box 30285</b> <b>Salt Lake City, UT 84130-0285</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>9055</b> When was the debt incurred? <b>2009-05</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$0.00</b>
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4.18	<b>Cbna</b> Nonpriority Creditor's Name <b>PO Box 6283</b> <b>Sioux Falls, SD 57117-6283</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>5327</b> When was the debt incurred? <b>2003-09</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$0.00</b>
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.19

**Cbusasears**

Nonpriority Creditor's Name

**Citicorp Credit Svcs/Centralized Bankrup**

**PO Box 790040**

**Saint Louis, MO 63179-0040**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6870**

**\$0.00**

When was the debt incurred? **2009-08**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.20

**Central DuPage Hospital**

Nonpriority Creditor's Name

**25 N Winfield Rd**

**Winfield, IL 60190-1222**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$84.76**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.21

**Chase Card**

Nonpriority Creditor's Name

**Attn: Correspondence Dept**

**PO Box 15298**

**Wilmington, DE 19850-5298**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **2228**

**\$24,784.02**

When was the debt incurred? **2005-09**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account Disney Visa**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.22

**Chase Card**

Nonpriority Creditor's Name

**Attn: Correspondence Dept  
PO Box 15298  
Wilmington, DE 19850-5298**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **5953**

**\$16,512.85**

When was the debt incurred? **1979-05**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Revolving account Slate Visa**

4.23

**Chase Card**

Nonpriority Creditor's Name

**PO Box 15298  
Wilmington, DE 19850-5298**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **2800**

**\$0.00**

When was the debt incurred? **1988-08**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Revolving account**

4.24

**Chase Card Services**

Nonpriority Creditor's Name

**Correspondence Dept  
PO Box 15278  
Wilmington, DE 19850-5278**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **1021**

**\$0.00**

When was the debt incurred? **2006-08**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.25	<b>Citibank/Goodyear</b> Nonpriority Creditor's Name <b>Citicorp Cr Srvs/Centralized Bankruptcy</b> <b>PO Box 790040S</b> <b>Louis, MO 63129</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>9405</b> When was the debt incurred? <b>2016-07</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$491.08</b>
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4.26	<b>Citibank/the Home Depot</b> Nonpriority Creditor's Name <b>Citicorp Cr Srvs/Centralized Bankruptcy</b> <b>PO Box 790040</b> <b>Saint Louis, MO 63179-0040</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0553</b> When was the debt incurred? <b>2015-06</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$1,066.27</b>
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4.27	<b>Comenity Bank/Avenue</b> Nonpriority Creditor's Name <b>PO Box 182125</b> <b>Columbus, OH 43218-2125</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>6321</b> When was the debt incurred? <b>2016-03</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$1,138.28</b>
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.28

**Comenity Bank/Carsons**

Nonpriority Creditor's Name

Last 4 digits of account number **1707**

**\$3,682.45**

When was the debt incurred? **2015-02**

**PO Box 182125  
Columbus, OH 43218-2125**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.29

**Comenity Bank/Cathrins**

Nonpriority Creditor's Name

Last 4 digits of account number **9249**

**\$0.00**

When was the debt incurred? **2002-05**

**PO Box 182789  
Columbus, OH 43218-2789**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.30

**Comenity Bank/Harlem Furniture**

Nonpriority Creditor's Name

Last 4 digits of account number **4780**

**\$0.00**

When was the debt incurred? **2003-05**

**PO Box 182125  
Columbus, OH 43218-2125**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.31	<b>Comenitybank/meijermc</b> Nonpriority Creditor's Name <b>Comenity Bank</b> <b>PO Box 182125</b> <b>Columbus, OH 43218-2125</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>4690</b> When was the debt incurred? <b>2014-11</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$2,592.51</b>
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4.32	<b>Costco Go Anywhere Citicard</b> Nonpriority Creditor's Name <b>Centralized Bk/Citicorp Credit Card Srvs</b> <b>PO Box 790040</b> <b>Saint Louis, MO 63179-0040</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>2860</b> When was the debt incurred? <b>2007-10</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$10,681.64</b>
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4.33	<b>Dept of Ed/Navient</b> Nonpriority Creditor's Name <b>Attn: Claims Dept</b> <b>PO Box 9635</b> <b>Wilkes Barre, PA 18773-9635</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0724</b> When was the debt incurred? <b>2012-07</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>Installment account</b>	<b>\$66,853.76</b>
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.34	<b>Dept of Ed/Navient</b> Nonpriority Creditor's Name <b>Attn: Claims Dept</b> <b>PO Box 9635</b> <b>Wilkes Barre, PA 18773-9635</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0921</b> When was the debt incurred? <b>2015-09</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>\$25,354.56</b>
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**Installment account**

4.35	<b>Dept of Ed/Navient</b> Nonpriority Creditor's Name <b>Attn: Claims Dept</b> <b>PO Box 9635</b> <b>Wilkes Barre, PA 18773-9635</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0917</b> When was the debt incurred? <b>2014-09</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>\$24,444.37</b>
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**Installment account**

4.36	<b>Dept of Ed/Navient</b> Nonpriority Creditor's Name <b>Attn: Claims Dept</b> <b>PO Box 9635</b> <b>Wilkes Barre, PA 18773-9635</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0913</b> When was the debt incurred? <b>2013-09</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>\$23,858.69</b>
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**Installment account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.37

**Dept of Ed/Navient**

Nonpriority Creditor's Name

**Attn: Claims Dept**

**PO Box 9635**

**Wilkes Barre, PA 18773-9635**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **0914**

**\$23,688.43**

When was the debt incurred? **2012-09**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

**Installment account**

4.38

**Dept of Ed/Navient**

Nonpriority Creditor's Name

**Attn: Claims Dept**

**PO Box 9635**

**Wilkes Barre, PA 18773-9635**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **0924**

**\$7,087.84**

When was the debt incurred? **2013-09**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

**Installment account**

4.39

**Dept of Ed/Navient**

Nonpriority Creditor's Name

**Claims Dept**

**PO Box 9400**

**Wilkes Barre, PA 18773-9400**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **0908**

**\$0.00**

When was the debt incurred? **2009-09**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Installment account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.40

**Dept of Ed/Navient**

Nonpriority Creditor's Name

**Claims Dept**

**PO Box 9400**

**Wilkes Barre, PA 18773-9400**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0804**

**\$0.00**

When was the debt incurred? **2009-08**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Installment account**

4.41

**Dept of Ed/Navient**

Nonpriority Creditor's Name

**Claims Dept**

**PO Box 9400**

**Wilkes Barre, PA 18773-9400**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0902**

**\$0.00**

When was the debt incurred? **2008-09**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Installment account**

4.42

**Discover Financial**

Nonpriority Creditor's Name

**PO Box 3025**

**New Albany, OH 43054-3025**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1692**

**\$16,757.66**

When was the debt incurred? **1988-04**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**



Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.43

**Dr. Shane Nho**

Nonpriority Creditor's Name

Last 4 digits of account number

**\$969.77**

When was the debt incurred?

**1611 W Harrison St Ste 400  
Chicago, IL 60612-4861**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.44

**Elan Financial Service**

Nonpriority Creditor's Name

Last 4 digits of account number

**6262**

**\$314.00**

When was the debt incurred?

**2016-07**

**PO Box 108**

**Saint Louis, MO 63166-0108**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.45

**Family Care Associates**

Nonpriority Creditor's Name

Last 4 digits of account number

**unknown**

When was the debt incurred?

**2422 Paysphere Cir**

**Chicago, IL 60674-0024**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.46

**First National Bank**

Nonpriority Creditor's Name

**Attn: FNN Legal Dept  
1620 Dodge St MSC CODE3290  
Omaha, NE 68191**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **9472**

**\$10,654.00**

When was the debt incurred? **2011-08**

As of the date you file, the claim is: Check all that apply

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account On credit report, Debtors cannot identify debt.**

4.47

**First National Bank Omaha**

Nonpriority Creditor's Name

**PO Box 2557  
Omaha, NE 68103-2557**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **2672**

**\$11,169.27**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.48

**Gilbert J LaFemina DDS FAGD, Ltd**

Nonpriority Creditor's Name

**345 E Burlington St Ste B1  
Riverside, IL 60546-2084**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Notice only**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.49

**Heart Care Centers of Illinois**

Nonpriority Creditor's Name

Last 4 digits of account number

**\$12.40**

When was the debt incurred?

**PO Box 766**

**Bedford Park, IL 60499-0766**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.50

**Hinsdale Orthopedic Assoc**

Nonpriority Creditor's Name

Last 4 digits of account number

**\$3,715.00**

When was the debt incurred?

**PO Box 5461**

**Carol Stream, IL 60197-5461**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.51

**Illinois Laboratory Medicine**

Nonpriority Creditor's Name

Last 4 digits of account number

**\$86.30**

When was the debt incurred?

**PO Box 5966**

**Carol Stream, IL 60197-5966**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.52

**Just Tires/Goodyear Credit Plan**

Nonpriority Creditor's Name

**PO Box 9001006  
Louisville, KY 40290-1006**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only
- ☒ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt
- Is the claim subject to offset?**
- ☒ No
- ☐ Yes

Last 4 digits of account number **9405**

**\$218.72**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify \_\_\_\_\_

4.53

**Kohls/Capital One**

Nonpriority Creditor's Name

**Kohls Credit  
PO Box 3043  
Milwaukee, WI 53201-3043**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt
- Is the claim subject to offset?**
- ☒ No
- ☐ Yes

Last 4 digits of account number **8657**

**\$3,744.92**

**When was the debt incurred?** **1994-09**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **Revolving account**

4.54

**Loyola University Medical Center**

Nonpriority Creditor's Name

**PO Box 95009  
Chicago, IL 60694-5009**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt
- Is the claim subject to offset?**
- ☒ No
- ☐ Yes

Last 4 digits of account number

**\$103.00**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify \_\_\_\_\_

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.55	<b>Macneal Hospital</b> Nonpriority Creditor's Name	Last 4 digits of account number <b>1130</b>	<b>\$0.00</b>
		When was the debt incurred? <b>2016-09</b>	
	As of the date you file, the claim is: Check all that apply		
	Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Open account</b>	

4.56	<b>MacNeal Hospital</b> Nonpriority Creditor's Name  <b>3249 Oak Park Ave</b> <b>Berwyn, IL 60402-3429</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>6843</b>	<b>\$178.79</b>
		When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	

4.57	<b>Metropolitan Advanced Radio S</b> Nonpriority Creditor's Name  <b>1362 Paysphere Cir</b> <b>Chicago, IL 60674-0013</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number	<b>\$332.00</b>
		When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.58	<b>Midwest Orthopedics at Rush LL</b> Nonpriority Creditor's Name  <b>PO Box 3087</b> <b>Carol Stream, IL 60132-3087</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<b>\$166.00</b>
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4.59	<b>Navient</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 9500</b> <b>Wilkes-Barr, PA 18873</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>0804</u> <b>When was the debt incurred?</b> <u>2009-08</u>  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Installment account</u>	<b>\$0.00</b>
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4.60	<b>Navient</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 9500</b> <b>Wilkes-Barr, PA 18873</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>0908</u> <b>When was the debt incurred?</b> <u>2009-09</u>  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Installment account</u>	<b>\$0.00</b>
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.61

**Navient**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 9500**

**Wilkes-Barr, PA 18873**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0902**

**\$0.00**

When was the debt incurred? **2008-09**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Installment account**

4.62

**Nelnet**

Nonpriority Creditor's Name

**Nelnet Claims/Bankruptcy**

**PO Box 82505**

**Lincoln, NE 68501-2505**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **7699**

**\$0.00**

When was the debt incurred? **2007-10**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Installment account**

4.63

**Nelnet Loans**

Nonpriority Creditor's Name

**Nelnet Claims**

**PO Box 82505**

**Lincoln, NE 68501-2505**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1099**

**\$0.00**

When was the debt incurred? **2007-09**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Installment account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.64

**NuMark Credit Union**

Nonpriority Creditor's Name

Last 4 digits of account number **6262**

**\$473.00**

**PO Box 790408**

**Saint Louis, MO 63179-0408**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify \_\_\_\_\_

4.65

**Radadvantage Illinois, PC**

Nonpriority Creditor's Name

Last 4 digits of account number

**\$31.02**

**PO Box 8500**

**Philadelphia, PA 19178-8500**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify \_\_\_\_\_

4.66

**Riverside Eye Corp.**

Nonpriority Creditor's Name

Last 4 digits of account number

**\$25.00**

**7222 W Cermak Rd Ste 1**

**North Riverside, IL 60546-1422**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify \_\_\_\_\_



Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.67

**RoomPlace Furniture / Comenity Bank**

Nonpriority Creditor's Name

**Comenity Bank**

**PO Box 182125**

**Columbus, OH 43218-2125**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.68

**Sophia E Welykyj MD**

Nonpriority Creditor's Name

**7234 Ogden Ave Ste 1-S**

**Riverside, IL 60546-2269**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$50.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.69

**Syncb/Lord & Taylor**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 965060**

**Orlando, FL 32896-5060**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**7602**

**\$0.00**

When was the debt incurred?

**2004-08**

As of the date you file, the claim is: Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.70

**Synchrony Bank / Hh Gregg**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 965060**

**Orlando, FL 32896-5060**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **2433**

**\$0.00**

When was the debt incurred? **2002-07**

As of the date you file, the claim is: Check all that apply

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Revolving account**

4.71

**Synchrony Bank/ Hh Gregg**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 965060**

**Orlando, FL 32896-5060**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **0072**

**\$0.00**

When was the debt incurred? **1999-12**

As of the date you file, the claim is: Check all that apply

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Revolving account**

4.72

**Synchrony Bank/ Jc Penney**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 965060**

**Orlando, FL 32896-5060**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **3976**

**\$3,432.78**

When was the debt incurred? **2014-07**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.73	<b>Synchrony Bank/ Jc Penneys</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 965060</b> <b>Orlando, FL 32896-5060</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>9319</b> When was the debt incurred? <b>2009-05-17</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$0.00</b>
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4.74	<b>Synchrony Bank/ Money Sport</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 965060</b> <b>Orlando, FL 32896-5060</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>8958</b> When was the debt incurred? <b>2009-07-26</b> As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$0.00</b>
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4.75	<b>Synchrony Bank/Pearle</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 965060</b> <b>Orlando, FL 32896-5060</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>9728</b> When was the debt incurred? <b>2011-03</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Revolving account</b>	<b>\$2,337.00</b>
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.76

**Synchrony Bank/Sams**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 965060**

**Orlando, FL 32896-5060**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number **6389**

**\$0.00**

When was the debt incurred? **2001-09**

**As of the date you file, the claim is:** Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.77

**Target**

Nonpriority Creditor's Name

**Bankruptcy Department**

**PO Box 1327**

**Minneapolis, MN 55440-1327**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number **4451**

**\$3,597.15**

When was the debt incurred?

**As of the date you file, the claim is:** Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

4.78

**Target**

Nonpriority Creditor's Name

**C/O Financial & Retail Svcs**

**Mailstop BT**

**PO Box 9475**

**Minneapolis, MN 55440-9475**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number **0727**

**\$4,324.75**

When was the debt incurred? **2012-04**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

4.79

**US Dept of Education**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 16448**

**Saint Paul, MN 55116-0448**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **2486**

**\$0.00**

When was the debt incurred? **2012-07-24**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Installment account**

4.80

**VHS of Illinois Inc**

Nonpriority Creditor's Name

**2384 Paysphere Cir**

**Chicago, IL 60674-0023**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$214.91**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Medical**

4.81

**VHS of Illinois Inc.**

Nonpriority Creditor's Name

**PO Box 2384**

**Chicago, IL 60690-2384**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$10,868.81**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

4.82

**Visa Dept Store National Bank/Macy's**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 8053**

**Mason, OH 45040-8053**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **4060**

**\$0.00**

When was the debt incurred? **2010-01**

As of the date you file, the claim is: Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

4.83

**Wells Fargo Bank**

Nonpriority Creditor's Name

**PO Box 10438**

**Des Moines, IA 50306-0438**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0618**

**\$0.00**

When was the debt incurred? **2007-07**

As of the date you file, the claim is: Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Revolving account**

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**Amex**

**PO Box 981537**

**El Paso, TX 79998-1537**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **1443**

Name and Address

**Amex**

**PO Box 981537**

**El Paso, TX 79998-1537**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **3523**

Name and Address

**Amex**

**PO Box 981537**

**El Paso, TX 79998-1537**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **0483**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Amex**  
**PO Box 981537**  
**El Paso, TX 79998-1537**

Line **4.6** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **1513**

Name and Address  
**Amex Dsnb**  
**9111 Duke Blvd**  
**Mason, OH 45040-8999**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2432**

Name and Address  
**Atlantic Credit and Finance Inc**  
**PO Box 13389**  
**Roanoke, VA 24033-3389**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **1916**

Name and Address  
**Atlantic Credit and Finance Inc**  
**PO Box 13389**  
**Roanoke, VA 24033-3389**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **1561**

Name and Address  
**Barclays Bank Delaware**  
**PO Box 8803**  
**Wilmington, DE 19899-8803**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.10** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2915**

Name and Address  
**Barclays Bank Delaware**  
**PO Box 8803**  
**Wilmington, DE 19899-8803**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **5298**

Name and Address  
**Bk of Amer**  
**PO Box 982238**  
**El Paso, TX 79998-2238**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2924**

Name and Address  
**Bk of Amer**  
**PO Box 982238**  
**El Paso, TX 79998-2238**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.9** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2403**

Name and Address  
**Cap One**  
**PO Box 5253**  
**Carol Stream, IL 60197-5253**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **5569**

Name and Address  
**Cap1/bstby**  
**50 NW Point Blvd**  
**Elk Grove Village, IL 60007-1032**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.13** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2454**

Name and Address  
**Cap1/carsn**  
**PO Box 30253**  
**Salt Lake City, UT 84130-0253**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **9055**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Capital Management Services, LP**  
**698 1/2 S Ogden St**  
**Buffalo, NY 14206-2317**

Line **4.10** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**2915**

Name and Address

**Capital Management Services, LP**  
**698 1/2 S Ogden St**  
**Buffalo, NY 14206-2317**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**5298**

Name and Address

**Cardmember Service**  
**PO Box 6335**  
**Fargo, ND 58125-6335**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.64** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**6262**

Name and Address

**Cardmember Service**  
**PO Box 108**  
**Saint Louis, MO 63166-0108**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.64** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**6262**

Name and Address

**Chase Card**  
**PO Box 15298**  
**Wilmington, DE 19850-5298**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**2228**

Name and Address

**Chase Card**  
**PO Box 15298**  
**Wilmington, DE 19850-5298**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**5953**

Name and Address

**Chase Card**  
**PO Box 15298**  
**Wilmington, DE 19850-5298**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1021**

Name and Address

**Citi**  
**PO Box 6190**  
**Sioux Falls, SD 57117-6190**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**2860**

Name and Address

**Cmre. 877-572-7555**  
**3075 E Imperial Hwy Ste**  
**Brea, CA 92821-6733**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.55** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1130**

Name and Address

**Comenity Bank**  
**Bankruptcy Department**  
**PO Box 182125**  
**Columbus, OH 43218-2125**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.67** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Comenity Bank/Avenue**  
**PO Box 182789**  
**Columbus, OH 43218-2789**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**6321**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?



Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

**Comenity Bank/Carsons**  
**PO Box 182789**  
**Columbus, OH 43218-2789**

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1707**

Name and Address

**Comenity Bank/Roomplce**  
**PO Box 182789**  
**Columbus, OH 43218-2789**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4780**

Name and Address

**Comenitybank/meijermc**  
**PO Box 182789**  
**Columbus, OH 43218-2789**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4690**

Name and Address

**Dept of Ed/Navient**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.33** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0724**

Name and Address

**Dept of Ed/Navient**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0921**

Name and Address

**Dept of Ed/Navient**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.35** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0917**

Name and Address

**Dept of Ed/Navient**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.36** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0913**

Name and Address

**Dept of Ed/Navient**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.37** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0914**

Name and Address

**Dept of Ed/Navient**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.38** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0924**

Name and Address

**Discover Fin Svcs LLC**  
**PO Box 15316**  
**Wilmington, DE 19850-5316**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1692**

Name and Address

**Dpt Ed/Slm**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.39** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0908**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

**Dpt Ed/Slm**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

Line **4.40** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0804**

Name and Address

**Dpt Ed/Slm**  
**PO Box 9635**  
**Wilkes Barre, PA 18773-9635**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.41** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0902**

Name and Address

**Dr. Shane Nh**  
**2450 Wolf Rd Ste F**  
**Westchester, IL 60154-5643**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.43** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0902**

Name and Address

**Dsnb Macys**  
**PO Box 8218**  
**Mason, OH 45040-8218**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.82** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4060**

Name and Address

**Family Care Associates**  
**PO Box 74008432**  
**Chicago, IL 60674-8432**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.45** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4060**

Name and Address

**First National Bank of Omaha**  
**PO Box 2490**  
**Omaha, NE 68103-2490**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.47** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**2672**

Name and Address

**First National Bank of Omaha**  
**PO Box 2951**  
**Omaha, NE 68103-2951**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.47** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**2672**

Name and Address

**Fnb Omaha**  
**PO Box 3412**  
**Omaha, NE 68103-0412**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9472**

Name and Address

**Goodyear Credit Account**  
**PO Box 7032**  
**Sioux Falls, SD 57117-7032**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.52** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9405**

Name and Address

**Goodyr/cbna**  
**PO Box 6497**  
**Sioux Falls, SD 57117-6497**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9405**

Name and Address

**Home Depot Credit Services**  
**PO Box 790328**  
**Saint Louis, MO 63179-0328**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0553**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if know)

**Home Depot Credit Services**  
**PO Box 78011**  
**Phoenix, AZ 85062-8011**

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0553**

Name and Address

**Homeprjvisa**  
**PO Box 94498**  
**Las Vegas, NV 89193-4498**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.83** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0618**

Name and Address

**Just Tires/Goodyear Credit Plan**  
**PO Box 6403**  
**Sioux Falls, SD 57117-6403**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.52** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9405**

Name and Address

**Kohls/capone**  
**PO Box 3115**  
**Milwaukee, WI 53201-3115**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.53** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**8657**

Name and Address

**Meyer Njus Tanick, PA**  
**330 2nd Ave S Ste 350**  
**Minneapolis, MN 55401-2212**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.72** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**3976**

Name and Address

**Midland Credit Management, Inc.**  
**2365 Northside Dr Ste 300**  
**San Diego, CA 92108-2709**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0553**

Name and Address

**Nationwide Credit & Collection**  
**c/o Evergreen Bank Group**  
**PO Box 3219**  
**Oak Brook, IL 60522-3219**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0804**

Name and Address

**Navient Solutions Inc**  
**PO Box 9500**  
**Wilkes Barre, PA 18773-9500**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.59** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0804**

Name and Address

**Navient Solutions Inc**  
**PO Box 9500**  
**Wilkes Barre, PA 18773-9500**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.60** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0908**

Name and Address

**Navient Solutions Inc**  
**PO Box 9500**  
**Wilkes Barre, PA 18773-9500**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.61** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0902**

Name and Address

**Nelnet Lns**  
**PO Box 1649**  
**Denver, CO 80201-1649**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.62** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**7699**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Nelnet Loans**  
**3015 S Parker Rd**  
**Aurora, CO 80014-2904**

Line **4.63** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **1099**

Name and Address  
**Phillips & Cohen Associates**  
**Mail Stop: 661**  
**1002 Justison St Stop 661**  
**Wilmington, DE 19801-5148**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.10** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2915**

Name and Address  
**Phillips & Cohen Associates**  
**Mail Stop: 661**  
**1002 Justison St Stop 661**  
**Wilmington, DE 19801-5148**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **5298**

Name and Address  
**Sears/Cbna**  
**PO Box 6282**  
**Sioux Falls, SD 57117-6282**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **6870**

Name and Address  
**Synco/Care Credit**  
**C/o**  
**PO Box 965036**  
**Orlando, FL 32896-5036**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.70** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2433**

Name and Address  
**Synco/jc Penney Dc**  
**PO Box 965007**  
**Orlando, FL 32896-5007**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.72** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **3976**

Name and Address  
**Synco/jcp**  
**PO Box 965007**  
**Orlando, FL 32896-5007**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.73** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **9319**

Name and Address  
**Synco/lord & Tay**  
**PO Box 965015**  
**Orlando, FL 32896-5015**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.69** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **7602**

Name and Address  
**Synco/lundstrom**  
**C/o**  
**PO Box 965036**  
**Orlando, FL 32896-5036**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.71** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **0072**

Name and Address  
**Synco/Pearle Vision**  
**C/o**  
**PO Box 965036**  
**Orlando, FL 32896-5036**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.75** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **9728**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Synco/Sams Club**  
**PO Box 965005**  
**Orlando, FL 32896-5005**

Line **4.76** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **6389**

Name and Address  
**Synco/Sync Bank Sport**  
**C/o**  
**PO Box 965036**  
**Orlando, FL 32896-5036**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.74** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **8958**

Name and Address  
**TD Bank USA, N.A.**  
**Attn: Bankruptcy Department**  
**PO Box 1327**  
**Minneapolis, MN 55440-1327**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.77** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **4451**

Name and Address  
**Td Bank USA/Targetcred**  
**PO Box 673**  
**Minneapolis, MN 55440-0673**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.78** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **0727**

Name and Address  
**Thd/Cbna**  
**PO Box 6497**  
**Sioux Falls, SD 57117-6497**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **0553**

Name and Address  
**US Dep Ed**  
**PO Box 5609**  
**Greenville, TX 75403-5609**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.79** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **2486**

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a. \$	<b>0.00</b>
	6b. Taxes and certain other debts you owe the government	6b. \$	<b>8,070.32</b>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$	<b>0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$	<b>0.00</b>
	6e. Total Priority. Add lines 6a through 6d.	6e. \$	<b>8,070.32</b>
		Total Claim	
Total claims from Part 2	6f. Student loans	6f. \$	<b>171,287.65</b>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$	<b>0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$	<b>0.00</b>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$	<b>158,185.35</b>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$	<b>329,473.00</b>

Fill in this information to identify your case:

Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Alonzo Cerda</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?**  
☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 <b>Vorizon Wireless</b>	<b>Monthly payment is \$265.00.</b>

Fill in this information to identify your case:			
Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Alonzo Cerda</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

**1. Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No  
☐ Yes

**2. Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

**3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

### Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

### Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number  
City

Street

State

ZIP Code

- ☐ Schedule D, line \_\_\_\_\_  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G, line \_\_\_\_\_

3.2

Name

Number  
City

Street

State

ZIP Code

- ☐ Schedule D, line \_\_\_\_\_  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1 Rose Marie Cerda

Debtor 2 Alonzo Cerda  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

Case number (If known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

	Debtor 1	Debtor 2 or non-filing spouse
<b>1. Fill in your employment information.</b>		
If you have more than one job, attach a separate page with information about additional employers.	<b>Employment status*</b>	
	<input checked="" type="checkbox"/> Employed	<input checked="" type="checkbox"/> Employed
	<input type="checkbox"/> Not employed	<input type="checkbox"/> Not employed
Include part-time, seasonal, or self-employed work.	<b>Occupation</b>	
	<u>See Schedule Attached</u>	
Occupation may include student or homemaker, if it applies.	<b>Employer's name</b>	
		<u>Alpha Baking Company</u>
	<b>Employer's address</b>	
		<u>5001 W Polk St</u> <u>Chicago, IL 60644-5249</u>
	<b>How long employed there?</b>	
		<u>19 years</u>

\*See Attachment for Additional Employment Information

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>4,058.41</u>	\$ <u>5,388.89</u>
<b>3. Estimate and list monthly overtime pay.</b>	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
<b>4. Calculate gross income.</b> Add line 2 + line 3.	4. \$ <u>4,058.41</u>	\$ <u>5,388.89</u>



Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ <b>4,058.41</b>	\$ <b>5,388.89</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <b>655.14</b>	\$ <b>994.19</b>
5b. Mandatory contributions for retirement plans	5b. \$ <b>0.00</b>	\$ <b>0.00</b>
5c. Voluntary contributions for retirement plans	5c. \$ <b>0.00</b>	\$ <b>0.00</b>
5d. Required repayments of retirement fund loans	5d. \$ <b>0.00</b>	\$ <b>0.00</b>
5e. Insurance	5e. \$ <b>679.47</b>	\$ <b>143.52</b>
5f. Domestic support obligations	5f. \$ <b>0.00</b>	\$ <b>0.00</b>
5g. Union dues	5g. \$ <b>0.00</b>	\$ <b>51.33</b>
5h. Other deductions. Specify: <b>Business expenses</b>	5h.+ \$ <b>55.00</b>	+ \$ <b>0.00</b>
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <b>1,389.61</b>	\$ <b>1,189.04</b>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <b>2,668.80</b>	\$ <b>4,199.85</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>0.00</b>	\$ <b>0.00</b>
8b. Interest and dividends	8b. \$ <b>0.00</b>	\$ <b>0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ <b>0.00</b>
8d. Unemployment compensation	8d. \$ <b>0.00</b>	\$ <b>0.00</b>
8e. Social Security	8e. \$ <b>0.00</b>	\$ <b>0.00</b>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ <b>0.00</b>	\$ <b>0.00</b>
8g. Pension or retirement income	8g. \$ <b>0.00</b>	\$ <b>0.00</b>
8h. Other monthly income. Specify:	8h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <b>0.00</b>	\$ <b>0.00</b>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <b>2,668.80</b>	+ \$ <b>4,199.85</b> = \$ <b>6,868.65</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$ <b>0.00</b>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ <b>6,868.65</b>	<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:		

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

**Official Form B 6I**  
**Attachment for Additional Employment Information**

<b>Debtor</b>	
Occupation	
Name of Employer	<b>Alpha Baking Company</b>
How long employed	<b>11 years</b>
Address of Employer	<b>5001 W Polk St Chicago, IL 60644-5249</b>

<b>Debtor</b>	
Occupation	<b>Occasionally books trips to Disn</b>
Name of Employer	<b>Self Employed</b>
How long employed	
Address of Employer	

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 expenses as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Your Household

1. **Is this a joint case?**
- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

**Dependent's relationship to Debtor 1 or Debtor 2**

Dependent's  
age

**Does dependent  
live with you?**

Do not state the dependents names.

**Son**

23

☐ No  
☒ Yes  
☐ No  
☐ Yes  
☐ No  
☐ Yes  
☐ No  
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

## Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

**Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)**

## Your expenses

- |       |          |
|-------|----------|
| 4. \$ | 1,953.00 |
|-------|----------|

**If not included in line 4:**

- |        |        |
|--------|--------|
| 4a. \$ | 0.00   |
| 4b. \$ | 0.00   |
| 4c. \$ | 100.00 |
| 4d. \$ | 0.00   |
| 5. \$  | 0.00   |

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a. \$	<b>335.00</b>
6b. Water, sewer, garbage collection	6b. \$	<b>60.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<b>270.00</b>
6d. Other. Specify: <b>Cell phones</b>	6d. \$	<b>265.66</b>
<b>7. Food and housekeeping supplies</b>	7. \$	<b>800.00</b>
<b>8. Childcare and children's education costs</b>	8. \$	<b>0.00</b>
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$	<b>50.00</b>
<b>10. Personal care products and services</b>	10. \$	<b>85.00</b>
<b>11. Medical and dental expenses</b>	11. \$	<b>700.00</b>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<b>275.00</b>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$	<b>0.00</b>
<b>14. Charitable contributions and religious donations</b>	14. \$	<b>0.00</b>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<b>280.20</b>
15b. Health insurance	15b. \$	<b>0.00</b>
15c. Vehicle insurance	15c. \$	<b>267.00</b>
15d. Other insurance. Specify: <b>Personal articles insurance</b>	15d. \$	<b>23.00</b>
<b>Umbrella Insurance</b>	\$	<b>125.00</b>
<b>Service Line Warrantys (Rose)</b>	\$	<b>52.33</b>
<b>State Farm Life Ins (Lon)</b>	\$	<b>10.00</b>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$	<b>0.00</b>
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$	<b>385.00</b>
17b. Car payments for Vehicle 2	17b. \$	<b>288.00</b>
17c. Other. Specify:	17c. \$	<b>0.00</b>
17d. Other. Specify:	17d. \$	<b>0.00</b>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$	<b>0.00</b>
<b>19. Other payments you make to support others who do not live with you.</b>	\$	<b>0.00</b>
Specify:	19.	
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$	<b>0.00</b>
20b. Real estate taxes	20b. \$	<b>0.00</b>
20c. Property, homeowner's, or renter's insurance	20c. \$	<b>0.00</b>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<b>0.00</b>
20e. Homeowner's association or condominium dues	20e. \$	<b>0.00</b>
<b>21. Other: Specify: <b>Pet Expenses</b></b>	21. +\$	<b>150.00</b>
<b>AAA Auto Club</b>	+\$	<b>13.00</b>
<b>Student Loans</b>	+\$	<b>525.00</b>
<b>Lunch, donations to charity (e.g. girlscut cookies)</b>	+\$	<b>80.00</b>
<b>22. Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$	<b>7,092.19</b>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	<b>7,092.19</b>
<b>23. Calculate your monthly net income.</b>		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	<b>6,868.65</b>
23b. Copy your monthly expenses from line 22c above.	23b. -\$	<b>7,092.19</b>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	<b>-223.54</b>

Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here: **The medical expenses include the debtors anticipated needs (anticipated dental expenses) and for physical therapy. Debtors also anticipate an increase in their real estate taxes which will increase their mortgage payment.**

**Income calculated using last two calendar month paystubs as overtime cut beginning in October 2017.**

**Fill in this information to identify your case:**

Debtor 1 Rose Marie Cerda  
First Name Middle Name Last Name

Debtor 2 Alonzo Cerda  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

Case number \_\_\_\_\_  
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Rose Marie Cerda  
Rose Marie Cerda  
Signature of Debtor 1

Date July 22, 2018

X /s/ Alonzo Cerda  
Alonzo Cerda  
Signature of Debtor 2

Date July 22, 2018

Fill in this information to identify your case:			
Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Alonzo Cerda</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married  
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1 lived there

Debtor 2 Prior Address:

Dates Debtor 2 lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

#### Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

From January 1 of current year until the date you filed for bankruptcy:

Debtor 1		Debtor 2	
Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$25,756.01	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$35,950.08

Debtor 1  
Debtor 2**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>For last calendar year: (January 1 to December 31, 2017)</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$41,293.23</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$61,936.72</b>
<b>For the calendar year before that: (January 1 to December 31, 2016)</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$38,006.41</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$63,609.64</b>

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<b>Ticket-To-Ride, Inc. Self employed paid through this group to arrange Disney trips</b>	<b>\$1,264.52</b>		
<b>For last calendar year: (January 1 to December 31, 2017)</b>	<b>Ticket to Ride</b>	<b>\$3,513.68</b>		
<b>For the calendar year before that: (January 1 to December 31, 2016)</b>	<b>Ticket to Ride</b>	<b>\$1,653.23</b>		

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- ☐ No. Go to line 7.  
☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.  
☒ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.



Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Santander Consumer USA PO Box 1984 Carmel, IN 46082-1984	April -June 2018	\$1,150.98	\$16,556.25	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other ____
Santander Consumer USA PO Box 1984 Carmel, IN 46082-1984	April - June 2018	\$859.89	\$12,613.98	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other ____
Bank of America 475 Crosspoint Pkwy Getzville, NY 14068-1609	Regular monthly payments of \$1,702.00 per month.	\$20,424.00	\$0.00	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other ____

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**  
*Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.*

- ☒ No  
☐ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**  
 Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
----------------------------	------------------	-------------------	----------------------	--

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**  
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No  
☐ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

- ☐ No. Go to line 11.  
☐ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
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11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☐ No  
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☐ No  
☐ Yes

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☐ No  
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☐ No  
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)			

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☐ No  
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
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**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No  
☐ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>James J. Haller Attorney at Law</b> <b>204 Edgemont Street</b> <b>Mundelein, IL 60060</b>	<b>0.00</b>		<b>\$2,950.00</b>

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  
Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☐ No  
☒ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
<b>CARMAX-Hillside</b> <b>101 N Wolf Rd Ste 8</b> <b>Hillside, IL 60162-1634</b>	<b>2005 Chevrolet Trailblazer</b> <b>VIN#: 1GNET16S656188594</b>	<b>Trade in for purchase of</b> <b>2015 Nissan Sentra.</b> <b>Trade-in allowance was</b> <b>\$2,000.00.</b>	<b>2/6/18</b>

<b>Continental Autos, Inc.</b> <b>6701 S La Grange Rd</b> <b>Hodgkins, IL 60525-4840</b>	<b>2007 Mitsubishi Outlander</b> <b>VIN#: JA4MT31XI 7U005629</b>	<b>Trade in for purchase of</b> <b>2015 Nissan Rogue.</b> <b>Trade in value was</b> <b>\$1,500.00.</b>	<b>2/3/18</b>
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19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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**Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No  
☒ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
PNC Bank	XXXX-	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other ____	Account closed in September 2017	\$116.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No  
☐ Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
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**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- ☒ *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☒ *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☒ *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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Debtor 1  
Debtor 2

**Cerda, Rose Marie & Cerda, Alonzo**

Case number (if known)

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
--	---	--

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No  
☐ Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Rose Marie Cerda  
Rose Marie Cerda  
Signature of Debtor 1

/s/ Alonzo Cerda  
Alonzo Cerda  
Signature of Debtor 2

Date July 22, 2018

Date July 22, 2018

Did you attach additional pages to Your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No  
☐ Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:			
Debtor 1	<b>Rose Marie Cerda</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Alonzo Cerda</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>Bank of America</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: <b>2522 Wesley Ave, Berwyn, IL 60402-2513</b>		
Creditor's name: <b>Diamond Resorts US Collection Dev LLC</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: <b>Retain and reaffirm subject to a reasonable modification.</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>Membership in Diamond Resorts U.S. Collection (the "Collection")</b>		
Creditor's name: <b>Santander Consumer USA</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>2015 Nissan Sentra</b>		

Debtor 1  
Debtor 2 **Cerda, Rose Marie & Cerda, Alonzo** Case number (if known)

property  
securing debt:

☐ Retain the property and [explain]:

Creditor's name: **Santander Consumer USA**

☐ Surrender the property.

☒ No

☐ Retain the property and redeem it.

☐ Yes

Description of property: **2015 Nissan Rogue Select AWD**

☒ Retain the property and enter into a *Reaffirmation Agreement*.

property

☐ Retain the property and [explain]:

securing debt:

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases**

**Will the lease be assumed?**

Lessor's name: **Vorizon Wireless**

☐ No

☒ Yes

Description of leased Property: **Monthly payment is \$265.00.**

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Rose Marie Cerda

X /s/ Alonzo Cerda

**Rose Marie Cerda**

**Alonzo Cerda**

Signature of Debtor 1

Signature of Debtor 2

Date July 22, 2018

Date July 22, 2018

**United States Bankruptcy Court**  
**Northern District of Illinois, Eastern Division**

In re **Cerda, Rose Marie & Cerda, Alonzo**

Debtor(s)

Case No.

Chapter

**7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>2,950.00</b>
Prior to the filing of this statement I have received .....	\$	<b>2,950.00</b>
Balance Due .....	\$	<b>0.00</b>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**The following costs are deducted from the fee paid: \$335.00 for filing fees, \$53.00 for a joint credit report, \$98.00 for two credit counseling classes (taken twice).**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the Debtor(s) in any dischargeability actions, relief from stay actions, motions to redeem property under 11 U.S.C. 722, preparation and filing of reaffirmation agreements and applications as needed, or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**July 22, 2018**

*Date*

**/s/ James J. Haller**

**James J. Haller**

*Signature of Attorney*

**James J. Haller Attorney at Law**

**PO Box 626**

**Mundelein, IL 60060-0626**

**(847) 325-5008 Fax: (847) 325-5566**

**jhaller@hallerlawgroup.com**

*Name of law firm*



IN RE:

Case No. \_\_\_\_\_

Cerda, Rose Marie & Cerda, Alonzo

Chapter 7

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors 129

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: July 22, 2018

/s/ Rose Marie Cerda

Debtor

/s/ Alonzo Cerda

Joint Debtor

Allen Rosenbaum MD  
3340 Oak Park Ave Ste 304  
Berwyn, IL 60402-3483

Amex  
Correspondence  
PO Box 981540  
El Paso, TX 79998-1540

Amex  
PO Box 981537  
El Paso, TX 79998-1537

Amex Dsnb  
9111 Duke Blvd  
Mason, OH 45040-8999

Athletico Sports Medicine  
625 Enterprise Dr  
Oak Brook, IL 60523-8813

Atlantic Credit and Finance Inc  
PO Box 13389  
Roanoke, VA 24033-3389

Bank America  
PO Box 5170  
Simi Valley, CA 93062-5170

Bank of America  
NC4-105-03-14  
PO Box 26012  
Greensboro, NC 27420-6012

Bank of America  
NC4-102-03-14  
PO Box 26012  
Greensboro, NC 27420-6012

Bank of America  
Attn: Bankruptcy Department  
475 Crosspoint Pkwy  
Getzville, NY 14068-1609

Bank of America  
PO Box 31785  
Tampa, FL 33631-3785

Bankamerica  
4909 Savarese Cir  
Tampa, FL 33634-2413

Barclays Bank Delaware  
PO Box 8803  
Wilmington, DE 19899-8803

Barclays Bank Delaware  
100 S West St  
Wilmington, DE 19801-5015

Bk of Amer  
4909 Savarese Cir  
Tampa, FL 33634-2413

Bk of Amer  
PO Box 982238  
El Paso, TX 79998-2238

Blue Cross Blue Shield of Illinois  
PO Box 7344  
Chicago, IL 60680-7344

Cap One  
PO Box 5253  
Carol Stream, IL 60197-5253

Cap1/bstby  
50 NW Point Blvd  
Elk Grove Village, IL 60007-1032

Cap1/bstby  
Capital  
1 1 Retail Srvs Attn Bankruptcy  
Salt Lake City, UT 84130

Cap1/carsn  
PO Box 30253  
Salt Lake City, UT 84130-0253

Capital Management Services, LP  
698 1/2 S Ogden St  
Buffalo, NY 14206-2317

Capital One  
PO Box 30253  
Salt Lake City, UT 84130-0253

Capital One  
Attn: General Correspondence/Bankruptcy  
PO Box 30285  
Salt Lake City, UT 84130-0285

Capital One / Carson  
Attn: General Correspondence/Bankruptcy  
PO Box 30285  
Salt Lake City, UT 84130-0285

Cardmember Service  
PO Box 6335  
Fargo, ND 58125-6335

Cardmember Service  
PO Box 108  
Saint Louis, MO 63166-0108

Cbna  
PO Box 6283  
Sioux Falls, SD 57117-6283

Cbusasears  
Citicorp Credit Srvs/Centralized Bankrup  
PO Box 790040  
Saint Louis, MO 63179-0040

Central DuPage Hospital  
25 N Winfield Rd  
Winfield, IL 60190-1222

Chase Card  
Attn: Correspondence Dept  
PO Box 15298  
Wilmington, DE 19850-5298

Chase Card  
PO Box 15298  
Wilmington, DE 19850-5298

Chase Card Services  
Correspondence Dept  
PO Box 15278  
Wilmington, DE 19850-5278

Citi  
PO Box 6190  
Sioux Falls, SD 57117-6190

Citibank/Goodyear  
Citicorp Cr Srvs/Centralized Bankruptcy  
PO Box 790040S  
Louis, MO 63129

Citibank/the Home Depot  
Citicorp Cr Srvs/Centralized Bankruptcy  
PO Box 790040  
Saint Louis, MO 63179-0040

Cmre. 877-572-7555  
3075 E Imperial Hwy Ste  
Brea, CA 92821-6733

Comenity Bank  
Bankruptcy Department  
PO Box 182125  
Columbus, OH 43218-2125

Comenity Bank/Avenue  
PO Box 182789  
Columbus, OH 43218-2789

Comenity Bank/Avenue  
PO Box 182125  
Columbus, OH 43218-2125

Comenity Bank/Carsons  
PO Box 182125  
Columbus, OH 43218-2125

Comenity Bank/Carsons  
PO Box 182789  
Columbus, OH 43218-2789

Comenity Bank/Cathrins  
PO Box 182789  
Columbus, OH 43218-2789

Comenity Bank/Harlem Furniture  
PO Box 182125  
Columbus, OH 43218-2125

Comenity Bank/Roomplce  
PO Box 182789  
Columbus, OH 43218-2789

Comenitybank/meijermc  
PO Box 182789  
Columbus, OH 43218-2789

Comenitybank/meijermc  
Comenity Bank  
PO Box 182125  
Columbus, OH 43218-2125

Continental Autos, Inc.  
6701 S La Grange Rd  
Hodgkins, IL 60525-4840



Costco Go Anywhere Citicard  
Centralized Bk/Citicorp Credit Card Srvs  
PO Box 790040  
Saint Louis, MO 63179-0040

Dept of Ed/Navient  
Attn: Claims Dept  
PO Box 9635  
Wilkes Barre, PA 18773-9635

Dept of Ed/Navient  
Claims Dept  
PO Box 9400  
Wilkes Barre, PA 18773-9400

Dept of Ed/Navient  
PO Box 9635  
Wilkes Barre, PA 18773-9635

Diamond Resorts US Collection Dev LLC  
10600 W Charleston Blvd  
Las Vegas, NV 89135-1014

Discover Fin Svcs LLC  
PO Box 15316  
Wilmington, DE 19850-5316

Discover Financial  
PO Box 3025  
New Albany, OH 43054-3025

Dpt Ed/Slm  
PO Box 9635  
Wilkes Barre, PA 18773-9635

Dr. Shane Nh  
2450 Wolf Rd Ste F  
Westchester, IL 60154-5643

Dr. Shane Nho  
1611 W Harrison St Ste 400  
Chicago, IL 60612-4861

Dsnb Macys  
PO Box 8218  
Mason, OH 45040-8218

Elan Financial Service  
PO Box 108  
Saint Louis, MO 63166-0108

Family Care Associates  
2422 Paysphere Cir  
Chicago, IL 60674-0024

Family Care Associates  
PO Box 74008432  
Chicago, IL 60674-8432

First National Bank  
Attn: FNN Legal Dept  
1620 Dodge St MSC CODE3290  
Omaha, NE 68191

First National Bank of Omaha  
PO Box 2490  
Omaha, NE 68103-2490

First National Bank of Omaha  
PO Box 2951  
Omaha, NE 68103-2951

First National Bank Omaha  
PO Box 2557  
Omaha, NE 68103-2557

Fnb Omaha  
PO Box 3412  
Omaha, NE 68103-0412

Gilbert J LaFemina DDS FAGD, Ltd  
345 E Burlington St Ste B1  
Riverside, IL 60546-2084

Goodyear Credit Account  
PO Box 7032  
Sioux Falls, SD 57117-7032

Goodyr/cbna  
PO Box 6497  
Sioux Falls, SD 57117-6497

Heart Care Centers of Illinois  
PO Box 766  
Bedford Park, IL 60499-0766

Hinsdale Orthopedic Assoc  
PO Box 5461  
Carol Stream, IL 60197-5461

Home Depot Credit Services  
PO Box 790328  
Saint Louis, MO 63179-0328

Home Depot Credit Services  
PO Box 78011  
Phoenix, AZ 85062-8011

Homeprjvisa  
PO Box 94498  
Las Vegas, NV 89193-4498

Illinois Laboratory Medicine  
PO Box 5966  
Carol Stream, IL 60197-5966

Internal Revenue Service  
PO Box 7346  
Philadelphia, PA 19101-7346

Just Tires/Goodyear Credit Plan  
PO Box 9001006  
Louisville, KY 40290-1006

Just Tires/Goodyear Credit Plan  
PO Box 6403  
Sioux Falls, SD 57117-6403

Kohls/Capital One  
Kohls Credit  
PO Box 3043  
Milwaukee, WI 53201-3043

Kohls/capone  
PO Box 3115  
Milwaukee, WI 53201-3115

Loyola University Medical Center  
PO Box 95009  
Chicago, IL 60694-5009

MacNeal Hospital  
3249 Oak Park Ave  
Berwyn, IL 60402-3429

Metropolitan Advanced Radio S  
1362 Paysphere Cir  
Chicago, IL 60674-0013

Meyer Njus Tanick, PA  
330 2nd Ave S Ste 350  
Minneapolis, MN 55401-2212

Midland Credit Management, Inc.  
2365 Northside Dr Ste 300  
San Diego, CA 92108-2709

Midwest Orthopedics at Rush LL  
PO Box 3087  
Carol Stream, IL 60132-3087

Nationwide Credit & Collection  
c/o Evergreen Bank Group  
PO Box 3219  
Oak Brook, IL 60522-3219

Navient  
Attn: Bankruptcy  
PO Box 9500  
Wilkes-Barr, PA 18873

Navient Solutions Inc  
PO Box 9500  
Wilkes Barre, PA 18773-9500

Nelnet  
Nelnet Claims/Bankruptcy  
PO Box 82505  
Lincoln, NE 68501-2505

Nelnet Lns  
PO Box 1649  
Denver, CO 80201-1649

Nelnet Loans  
3015 S Parker Rd  
Aurora, CO 80014-2904

Nelnet Loans  
Nelnet Claims  
PO Box 82505  
Lincoln, NE 68501-2505

NuMark Credit Union  
PO Box 790408  
Saint Louis, MO 63179-0408

Phillips & Cohen Associates  
Mail Stop: 661  
1002 Justison St Stop 661  
Wilmington, DE 19801-5148

Radadvantage Illinois, PC  
PO Box 8500  
Philadelphia, PA 19178-8500

Riverside Eye Corp.  
7222 W Cermak Rd Ste 1  
North Riverside, IL 60546-1422

RoomPlace Furniture / Comenity Bank  
Comenity Bank  
PO Box 182125  
Columbus, OH 43218-2125

Santander Consumer USA  
PO Box 1984  
Carmel, IN 46082-1984

Sears/Cbna  
PO Box 6282  
Sioux Falls, SD 57117-6282

Sophia E Welykyj MD  
7234 Ogden Ave Ste 1-S  
Riverside, IL 60546-2269

Syncb/Care Credit  
C/o  
PO Box 965036  
Orlando, FL 32896-5036

Syncb/jc Penney Dc  
PO Box 965007  
Orlando, FL 32896-5007



Syncb/jcp  
PO Box 965007  
Orlando, FL 32896-5007

Syncb/lord & Tay  
PO Box 965015  
Orlando, FL 32896-5015

Syncb/Lord & Taylor  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Syncb/lundstrom  
C/o  
PO Box 965036  
Orlando, FL 32896-5036

Syncb/Pearle Vision  
C/o  
PO Box 965036  
Orlando, FL 32896-5036

Syncb/Sams Club  
PO Box 965005  
Orlando, FL 32896-5005

Synccb/Sync Bank Sport  
C/o  
PO Box 965036  
Orlando, FL 32896-5036

Synchrony Bank / Hh Gregg  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/ Hh Gregg  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/ Jc Penney  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/ Jc Penneys  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/ Money Sport  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/Pearle  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/Sams  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Target  
C/O Financial & Retail Srvs Mailstopn BT  
PO Box 9475  
Minneapolis, MN 55440-9475

Target  
Bankruptcy Department  
PO Box 1327  
Minneapolis, MN 55440-1327

TD Bank USA, N.A.  
Attn: Bankruptcy Department  
PO Box 1327  
Minneapolis, MN 55440-1327

Td Bank USA/Targetcred  
PO Box 673  
Minneapolis, MN 55440-0673

Thd/Cbna  
PO Box 6497  
Sioux Falls, SD 57117-6497

US Dep Ed  
PO Box 5609  
Greenville, TX 75403-5609

US Dept of Education  
Attn: Bankruptcy  
PO Box 16448  
Saint Paul, MN 55116-0448

VHS of Illinois Inc  
2384 Paysphere Cir  
Chicago, IL 60674-0023

VHS of Illinois Inc.  
PO Box 2384  
Chicago, IL 60690-2384

Visa Dept Store National Bank/Macy's  
Attn: Bankruptcy  
PO Box 8053  
Mason, OH 45040-8053

Wells Fargo Bank  
PO Box 10438  
Des Moines, IA 50306-0438

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

**You are an individual filing for bankruptcy,**  
and

**Your debts are primarily consumer debts.**  
*Consumer debts* are defined in 11 U.S.C.  
§ 101(8) as "incurred by an individual  
primarily for a personal, family, or  
household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under  
one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan  
for family farmers or  
fishermen

Chapter 13 - Voluntary repayment plan  
for individuals with regular  
income

**You should have an attorney review your  
decision to file for bankruptcy and the choice of  
chapter.**

### Chapter 7: Liquidation

\$245	filing fee
\$75	administrative fee
+	\$15 trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial  
difficulty preventing them from paying their debts  
and who are willing to allow their nonexempt  
property to be used to pay their creditors. The  
primary purpose of filing under chapter 7 is to have  
your debts discharged. The bankruptcy discharge  
relieves you after bankruptcy from having to pay  
many of your pre-bankruptcy debts. Exceptions  
exist for particular debts, and liens on property may  
still be enforced after discharge. For example, a  
creditor may have the right to foreclose a home  
mortgage or repossess an automobile.

However, if the court finds that you have committed  
certain kinds of improper conduct described in the  
Bankruptcy Code, the court may deny your  
discharge.

You should know that even if you file chapter 7 and  
you receive a discharge, some debts are not  
discharged under the law. Therefore, you may still  
be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement  
obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

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## Chapter 11: Reorganization

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	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

#### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:  
[http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

### **Bankruptcy crimes have serious consequences**

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:  
[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html)

In Alabama and North Carolina, go to:  
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.



Document Page 105 of 105  
United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Case No. \_\_\_\_\_

**Cerda, Rose Marie & Cerda, Alonzo**

Chapter **7**

Debtor(s)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

Social Security number (If the bankruptcy  
petition preparer is not an individual, state  
the Social Security number of the officer,  
principal, responsible person, or partner of  
the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X** \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or  
partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

**Cerda, Rose Marie & Cerda, Alonzo**

**X /s/ Rose Marie Cerda**

**7/22/2018**

Printed Name(s) of Debtor(s)

Signature of Debtor

Date

Case No. (if known) \_\_\_\_\_

**X /s/ Alonzo Cerda**

**7/22/2018**

Signature of Joint Debtor (if any)

Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.